



STATE OF ALABAMA
DEPARTMENT OF AGRICULTURE & INDUSTRIES
Weights and Measures Division
P O Box 3336
Montgomery AL 36109-0336



APPLICATION
FOR
CERTIFIED PUBLIC WEIGHMASTER CERTIFICATE

I, _____, citizen of the United States, have familiarized myself with
(Individual Weighmaster)

the law relative to Public Weighmaster and do hereby make application for certification as a

Certified Public Weighmaster for _____ located at
(Company)

_____, Alabama _____
(Physical Address and City) (Zip Code)

Mailing Address: _____,
(Address and City) (State) (Zip Code)

Email Address: _____

Telephone: _____

I certify that I am morally and Physically fit to perform the duties imposed upon a Certified Public Weighmaster, and will comply with the law, rules and regulation relating to Certified Public Weighmaster to the best of my knowledge and ability.

(Weighmaster)

“We, the undersigned, being citizens of Alabama, do hereby certify that the applicant herein is a person of good moral character and that the statements made in the foregoing application are true to the best of our knowledge and belief and that our endorsement is without fear of embarrassment.”

Name _____ Address _____

Name _____ Address _____

I do certify that _____ has been made known to me and that the statements contained in this application are true to the best of my knowledge and belief.

Notary Public

Commission Expires